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NOTES FROM THE MEDICAL PRESS



IN CHARGE OF

ELISABETH ROBINSON SCOVIL

ANTISEPTIC THERMOMETER CASE.—Dr. J. H. Dempster, in the *Journal of the American Medical Association*, recommends the use of a thermometer case suspended by a chain, as it is easy to pour into it a few drops of dilute formaldehyde solution, keeping the thermometer antiseptic. It should, of course, be washed before and after using.

THE ICE BAG AND APPENDICITIS.—Dr. A. M. Fauntleroy, in the *Medical Record*, warns against the use of the ice bag in appendicitis. The relief is probably due to the numbness of the peritoneum brought about by cold; nature is deluded and does not call out the reserve leucocytes to fight the foe. She usually tries to wall off the acutely inflamed or gangrenous appendix from the general peritoneal cavity and this process is prevented by the chilling influence of the ice bag. A hot-water bag is distinctly preferable.

THE OPHTHALMIC NURSE.—Dr. Samuel Theobald, writing in the *Johns Hopkins Hospital Bulletin*, says the well-trained nurse taking up ophthalmic nursing will soon learn some requirements of the work. She will find that the keen edge of a cataract knife will not stand more than thirty seconds' boiling, and that the slightest rough usage will blunt its delicate point. The gauze needed to make a sponge for the general surgeon is enough to make half a dozen for the ophthalmic surgeon. The solution in an eye-dropper is apt to be contaminated if the dropper is held with its tip uppermost. The important point with reference to the illumination of a ward or room in an ophthalmic hospital is that it should be constant; a flapping window shade, for instance, should not be tolerated. A painful eye may be relieved by elevating the head by means of an extra pillow or two. After a delicate operation, a patient with both eyes closed should not be permitted to take a single step without guidance. In applying a solution to the eye of a nervous patient, draw the lower lid slightly away from the eye, while the patient throws the head back and looks upward, then let the drops fall between the lower lid and the eye. If it is important that the solution should come undiluted in contact with the cornea, the upper lid is drawn up and away from the eye while the patient, with head thrown back,

looks downwards, the cornea being thus exposed, the drops may be directed upon it. Only one drop of strong or poisonous solutions should be used.

A NEW TEST FOR PREGNANCY.—*The Interstate Medical Journal*, speaking of a test reported in a German contemporary, says that if placental extract is mixed with blood serum obtained from a pregnant woman, the placental proteids are disintegrated and peptones are formed. If the woman from whom the blood serum was obtained was not pregnant, no change takes place in it. This test may become of great practical importance.

WHEAT BRAN IN CONSTIPATION.—At a meeting of the Medical Association of the Greater City of New York, Dr. A. Ernest Gallant advocated the use of wheat bran in overcoming constipation. For the relief of habitual constipation, it should be taken daily in doses of one or two heaping tablespoonsful. It can be stirred in a glass of cold water, or mixed with a cooked cereal, or eaten with cream and sugar. Children like it mixed with jelly, jam, marmalade, honey, or syrup and spread on bread or toast.

Sometimes it may be necessary to continue the usual cascara or other laxative for a few days, but as soon as the habitual stool is established, that must be stopped. Among the several hundred patients to whom he had taught the bran habit, there had been many who suffered from chronic diarrhoea, diarrhoea alternating with constipation, mucous colitis, enema constipation, or that due to castor oil, saline waters, and other agents whose secondary effect was astringent. The slightest desire to defecate must be immediately attended to.

THE THERAPEUTIC USE OF BLOOD.—*The Journal of the American Medical Association* has an editorial on this subject. An interesting development in minor surgery is the use of blood to stop hemorrhage. Blood may be drawn from a normal person and injected subcutaneously at once, or, if preferred, a sterile flask with a coiled wire may be used to receive the blood which is then defibrinated so as to be ready for injection. If haste is not necessary, a simple procedure is to allow the blood to stand in the ice box in a sterile bottle, the serum being used for injection as required. Blood serum is also efficacious when administered locally and is markedly hemostatic when applied to oozing surfaces. Good results follow injections of blood or serum in hemorrhage of the new born, except when life is endangered from ensanguination; in these cases direct transfusion is indicated.

COOLING HOSPITAL WARDS IN SUMMER.—*The American Journal of Surgery* in an editorial recommends that hospitals be provided with a complete ward-cooling system. In a small room an electric fan adds

enormously to a patient's comfort on a hot day. No such device is possible in a large ward. An adequate supply of cold air, automatically regulated, should be supplied. Air sucked over brine pipes can be delivered through ventilators by means of pumps, or blowers, and will be sufficiently cold to cool a large room. In rooms not too large a series of fans, not too near any patient, might be operated at one end and the air from them blown over blocks of ice. Water curtains can be used to reduce room temperature, though this is a crude method.

Light, frequently changed bedclothes, cool drinks, frequent sponge baths, and protection from flies and mosquitoes are the nurses' contribution towards the patient's comfort. The surgeon can substitute caps, tapes, and straps for bulky roller bandages about the head and neck, while abundant discharge from wounds can be managed with small dressings, frequently changed.

ZINC OXIDE AS A DEODORANT.—Dr. W. P. Cunningham, writing in the *Medical Record*, emphasizes the use of oxide of zinc powder as a deodorant. In a particularly aggravated case of leg ulcers, zinc oxide powder was freely used until the ulceration was filled flush with the skin and covered with a bandage kept wet with a ten per cent. solution of boric acid lotion. The patient complained of pain but the offensive odor entirely disappeared.

BUTTERMILK IN DIARRHŒA OF INFANTS.—A writer in a German medical journal reports the case of four infants, from three to five months old, who were losing weight from diarrhœa. Buttermilk was substituted for two or more of the ordinary feedings during the day, with immediate improvement. Buttermilk is effectual on account of its low fat content and high lime content and its considerable proportion of albumen.

TECHNIC FOR EXTENSION AFTER FRACTURE.—*The Journal of the American Medical Association*, quoting from the *Polyclinico*, says that Socia winds a bicycle tire around the leg and inflates it with the air pump. This holds even an oblique fracture firm and permits traction from the beginning with two strips of cloth lengthwise of the leg under the inflated tire and extending below the foot to form a loop. The tire can easily be removed and replaced. If the pressure is too tight, a little air can be allowed to escape, or the pressure increased by pumping in a little more air.